

Staple Issue Slip Here  
**BEST AVAILABLE COPY**

POSITION	ID NO.	DATE
CLASSIFIER	19	10/25/83
EXAMINER	351	10-27-93
TYPIST	28	1/28
VERIFIER	120	1/31/94
CORPS CORR.		
SPEC. HAND	E42	1-26-94
FILE MAINT.	431	10/1/93
DRAFTING		

**INDEX OF CLAIMS**

Claim	Date
Final Original	
1	1/8
2	4/8
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**SYMBOLS**  
✓ ..... Rejected  
= ..... Allowed  
- (Through numeral) Canceled  
+ ..... Restricted  
N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Date
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